

SOBER HOUSE ADDENDUM TO REQUEST FOR REASONABLE ACCOMMODATION

Department of Safety and Inspections Zoning Administrator 375 Jackson Street Suite 220 Saint Paul, MN 55101 (651) 266 - 9008 / Fax: (651) 266 - 4194

facilities such as the kitchen, common areas, and bathrooms?

If no, explain_____

cleaning and general maintenance of the house?

No

Yes 🔲

If no, explain_____

Zoning Office Use Only	
File #:	
Sections:	
City Agent	
Zoning	

	Name			
APPLICANT (operator	Address			
or resident representative)	CitySt	Zip	Daytime Phone	
	House Manager (if different)		Phone	
PROPERTY LOCATION	Address/Location			
approval for a red dwelling unit. Additional reasonadditional sheet	easonable accommodation from the	ne maximum number of u guested by the applicant b	e zoning administrator will issue a written nrelated persons living together in a by providing a further explanation on an nefit persons with a disability, and why it	
	s placed in the house by an outside			
	nt live in the house indefinitely?	res No		
3. Does the resi	dent have access to the entire hou	use (or entire unit, if 2+ ur	nit property), including all household	

4. Does the whole house function as a single household unit, where the residents share in common duties such as

Yes

herein certify that the above information is true an best of my knowledge. Applicant's Signature	
☐ Any additional information to further explain any of the answers to the above questions	
☐ A floor plan showing the layout and specifying the number of beds in the house	
☐ An alternative parking plan (if applicable) that demonstrates sufficient parking for the use	
☐ Site plan showing off-street parking spaces	
Attach the following: A written copy of the house rules	
11. Who refers residents to the house, if applicable?	
If no, explain	
Yes No No	
10. Generally, do residents go through alcohol or controlled substance treatment programs prior to house?	_
If yes, explain	
9. Are any of these services or meetings open to persons not residing in the sober house? Yes	No 🗌
8. Do services or meetings related to the residents' recovery take place at the house? Yes Note that no, explain	o 🗌
If no, explain	
Yes No	
 Does the house have a written policy banning alcohol and controlled substance use and possessi 	on by residents?
If no, explain	
6. Do house residents have input in reviewing and accepting new residents? Yes No	
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Yes No No lift no, explain	